Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER California Federation of Teachers COPE Prop/Ballot Committee	**Date of This Filing** _____ 06/17/2010 _____

CALIFORNIA FORM 497

AREA CODE/PHONE NUMBER (818)843-8226	I.D. NUMBER (if applicable) 1240104

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STREET ADDRESS

☐ **Amendment to Report No.** _____
(explain below)

Page 1 of 2

CITY Burbank	STATE CA	ZIP CODE 91505-

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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR **(IF COMMITTEE, ALSO ENTER I.D. NUMBER)**	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
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*Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other

PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
06/16/2010	Taxpayers Against Protecting Polluters Sacramento, CA 95814 ID# 1327516	Increases Legislative Vote Requirement to Two-Thirds for State Levies and Charges (09-0093) Statewide	$5,000.00	11/02/2010

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC